Wyoming's Strategic Prevention Framework State Incentive Grant

Community Strategic Planning Workbook



Table of Contents

Strategic Planning Contributors	3
Introduction	
Evidence-based Prevention	8
Logic Model	10
Organization of Strategic Plan	12
Form 1: Cover Sheet	12
Form 2: Geographic Setting/Community Characteristics	13
Form 3: Coalition Involvement	14
Form 4: Consumption & Consequence Areas	15
Form 5: Intervening Variables/Causal Areas	16
Form 6: Community Resources	
Form 7: Strategies	18
Form 8: Community Readiness & Experience	19
Form 9a: Activities & Outcomes	20
Form 9b: Time Line Year 1	21
Form 9c: Time Line Year 2	22
Form 10: Budget	23
Form 11: Community Infrastructure	
Form 12: Cultural Competency	26
Form 13: Sustainability	27
Form 14: Evaluation	28

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Workbook is Also Available Online: http://spfsig.preved.org/news.php

Strategic Planning Contributors

List the names of people in your community, the organizations they represent, and the contributions they made to the development of the strategic plan in Table 1 below.

Table 1. Strategic Planning Contributors

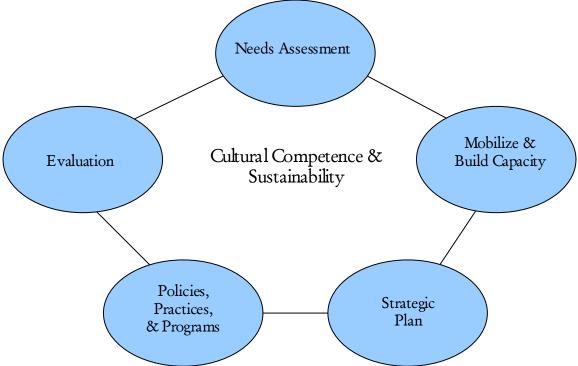
Name	Organization	Contribution
Judge Frank Zebre	Lincoln County Courts	Program approval and accommodation
Sheriff Shane Johnson	Lincoln County Sheriff	Time and position to PSA and advertising campaign.
Sarah Hales	Star Valley Independent	Media exposure and access. Planning & Implementation
Jean Tew	Lincoln County Public Health	Planning & Implementation
Mary Ann Putnam	Lincoln County Public Health	Planning & Implementation
Mark Hunter	Owner- Hunter's Maytag	Planning & Implementation
Jim Webb – CEO	Lower Valley Energy	Planning & Implementation
Shelly Cowell	Lincoln County Schools	Strategic Planning
Tracey Sorenson	After School Programs	Strategic Planning
Chief Tim Heggenstaller	Afton PD	Strategic Planning
Steve Corsi	Lincoln County Schools	Strategic Planning
Sarah Rosas	HCCRC	Planning & Implementation

Introduction

Wyoming received the Strategic Prevention Framework State Incentive Grant (Prevention Framework) from the Federal Substance Abuse Mental Health Services Administration (SAMSHA) on September 30, 2004, along with 20 other states and territories.

The purpose of the project is to implement the five components of the SPF planning model at both state and community levels in Wyoming. The following diagram details this process (Center for Substance Abuse Prevention, 2005).

Figure 1. Five Steps of the Strategic Prevention Framework Process



At the state level, Wyoming has completed the needs assessment and funding allocation plan. Mobilization and capacity building take place throughout the project. Wyoming's needs assessment identified the targeted problem as the misuse of alcohol and its consequences, and Wyoming's allocation strategy funds all 23 counties and the Wind River Reservation as Prevention Framework (PF) community grantees.

Outcome-Based Prevention

The foundation of the PF process is the outcome-based prevention model (Lowther & Birckmayer, 2006).

Figure 2. PF Needs Assessment Logic Model



In this model a community details its substance-related consumption and consequence data, researches the causal areas that may impact these problems, and chooses evidence-based policies, practices, and programs to address the identified causal areas.

Purpose

The purpose of this workbook is to help PF funded communities go through the outcome-based prevention model. The current task is to develop a strategic plan. This means that grantees, and the community partnerships, must successfully select and implement evidence-based interventions. This workbook lays out the organizational structure of the Strategic Plan that is to be developed by each community. To be effective, you should not complete this workbook alone. Instead, you and your Community Advisory Council (CAC) should work together to complete this task.

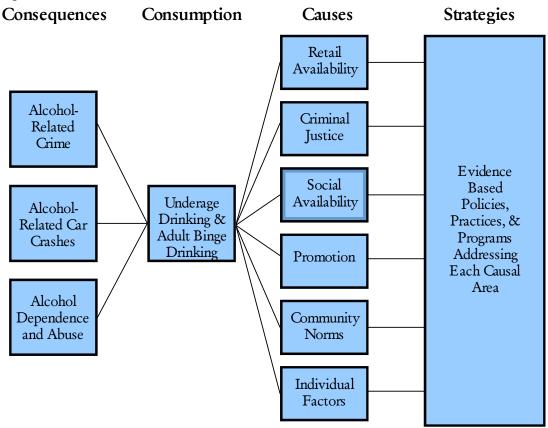
Keep in mind that Wyoming has already identified the targeted need for this project—the misuse of alcohol.

"Misuse of alcohol" means that:

- 1. The primary target for the PF is underage drinking, and adult binge drinking. Underage drinking refers to any use of alcohol by anyone under the age of 21, while adult binge drinking refers to those 18 years and older who have five of more drinks on any one occasion.
- 2. The secondary target for the PF is the most significant consequences of the misuse of alcohol in Wyoming: alcohol-related crime, alcohol-related motor vehicle crashes, and alcohol dependence and abuse.

Workbook Organization

Figure 3. Outcome-Based Prevention Model



Developing a comprehensive strategic plan at the community level requires a vision for organizing specific prevention programs, policies, and practices to address substance abuse problems locally. A well-developed strategic plan will increase the likeliness of a strategy being implemented effectively.

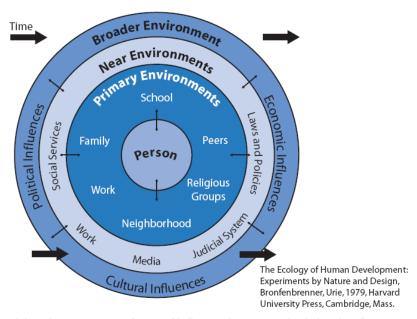
The deadline for submitting your Community Strategic Plan is August 31, 2007. Two copies of the Community Strategic Plan should be submitted, one by mail and one electronically to:

Lisa Laake, MPH, CHES
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Human Environmental Framework

Figure 4 illustrates the Human Environmental Framework, which shows that interventions can start in many different areas and will affect more than one environment. Strategies that focus on multiple factors and conditions will contribute to a more comprehensive prevention plan.

Figure 4. Human Environmental Framework



This figure depicts social environments or spheres of influence in concentric circles that flare outward, moving progressively away from direct influence on the individual toward increasingly indirect influence, and advancing over time. A comprehensive intervention plan should identify a mix or layering of interventions that target salient risk and protective factors in multiple contexts across the life span.

Evidence-based Prevention

States are required to follow certain guidelines in the policies, practices, and programs it selects in the Prevention Framework project. Every strategy implemented by the Prevention Framework must be evidence-based. This means that 100% of all strategies must be evidence-based.

Under the Prevention Framework project, evidence-based is defined as follows:

- 1. Inclusion in a Federal List or Registry of evidence-based interventions;
- 2. Being reported (with positive effects) in a peer-reviewed journal; OR
- 3. Documentation of effectiveness based on the following three guidelines:
 - The intervention is based on solid theory or theoretical perspective that has been validated by research;
 - The intervention is supported by a documented body of knowledge a converging of empirical evidence of effectiveness – generated from similar or related interventions tat indicate effectiveness; AND
 - The intervention is judged by a consensus among informed experts to be effective based on a combination of theory, research and practice experience. "Informed experts" may include key community prevention leaders, and elders or respected leaders within indigenous cultures.

Finding Strategies

The following is list of websites that may be used to find evidence-based strategies. This is not an all-inclusive list and may also include strategies that would not be relevant for your community:

- National Registry of Evidence-based Programs and Practices: http://www.nrepp.samhsa.gov/
- Office of Juvenile Justice and Delinquency Prevention: http://www.dsgonline.com/mpg2.5/mpg index.htm
- CSAP's Centers for the Application of Prevention Technologies (CASAT): http://casat.unr.edu/bestpractices/search.php
- Alcohol Policy Information System: http://www.alcoholpolicy.niaaa.nih.gov/index.asp?SEC={B4296FE1-6F35-4175-B85D-17D5A53EE062}&Type=NONE
- Leadership to Keep Children Alcohol Free: http://www.alcoholfreechildren.org/en/prevention/pubs.cfm
- National Highway Traffic Safety Administration (NHTSA):

http://www.nhtsa.dot.gov/portal/site/nhtsa/menuitem.3d62007aac5298598fcb 6010dba046a0/

Every participant has received a CD containing research articles and other publications that may be useful in developing your strategic plan.

Evidence-based Environmental Strategies

The following is a list of just a few of the evidence-based environmental strategies:

- Responsible beverage service
- Alcohol compliance checks
- Happy hour restrictions
- Reducing alcohol outlet density
- Limiting hours/days of retail sales
- Sobriety and traffic safety checkpoints
- Graduated drivers' license laws
- Social host laws
- Keg registration
- Restricting alcohol sales at public events
- Increasing taxes on sales of alcohol
- Dram shop liability

Choosing the Right Strategy for your Community

There are many factors to consider prior to choosing your strategies. Not all strategies will be effective in all communities.

All strategies must be based on data collected around each of the causal areas during your Needs Assessment. Please review your Needs Assessment Workbook.

One factor to consider is whether or not there is community support for the strategy. If the community does not support the strategy, it is unlikely that the strategy would bring about positive change if implemented.

It is also important to look at what laws are already in place and what laws may prevent certain strategies from being implemented. For example, sobriety checkpoints, shown to be evidence-based, are unlawful in Wyoming (Statute 7-17-101). For this reason, it would not make sense for a community to focus on this strategy.

Another factor to consider is which strategies show the greatest likelihood of showing positive results. There are many great strategies out there, but it is important to look at what the effect would be on the community as a whole.

Logic Model

Logic Model

The Centers for Disease Control and Prevention defines logic model as "a systematic and visual way to present the perceived relationships among the resources you have to operate the program, the activities you plan to do, and the changes or results you hope to achieve" (www.cdc.gov/tobacco/evaluation_manual/glossary.html).

The logic model found on page 11 should be completed by all communities as part of the Strategic Plan. It is important that you work with your coalition when developing this logic model. All communities will have an opportunity to practice developing a logic model.

Community Logic Model

What are the consequence and consumption areas you are going to focus on (from Needs Assessment)? Include your goals and objectives.	What are the causal areas you are going to focus on (review your answer to Question 40 from the Needs Assessment)?	What evidence- based strategies are you going to use for each causal area?	What activities are going to take place in Year 1 (October 2007 - September 2008)?	What activities are going to take place in Year 2 (October 2008 – September 2009)?	What are you going to do to evaluate your strategies?
A reduction in the % of 6 th graders who are getting alcohol from their parents. The reduction of underage youth who are obtaining alcohol from someone over 21.	Social Availability & Community Norms	Prime for Life	Social Norming campaigns involving mobile ads, PSA's, newspaper coverage, business owner involvement, and, partnering with local law	Data Gathering & Needs Assessment to focus on ignition locks and check points. Year one sustainability.	The coalition agrees to work closely with WYSAC in developing evaluation methods for our county.

	enforcement agencies.	

Organization of Strategic Plan

Form 1:	Cover Sheet			
(Please place this as the t	op page for your	applic	cation)	
County: Lincoln				
Name and title of primary contact: Carl	J Harris	Phone	: 307-885-9	9883
Email (required): <u>prevention@silverstar.c</u> Fax: 307-885-5206	<u>com</u>			
Mailing Address: PO Box 376 83110		City:	Afton	Zip:
Shipping Address (if different): 389 Adan	ıs St. Afton, WY	8311	0	
Total Funding Request for First Year Im	plementation: \$73	3,958.0	00	
Name, organization, address, phone, fax, <u>Lead Agency</u> authorized to sign contracts		tificati	on numbe	er for the
High Country Counseling and Resource Vern A Cox - Executive Director PO Box 376 Afton, WY 83110 307-885-9883 fax: 307-885-5206 EIN therap331@silverstar.com	Centers: 73-1651475			
Certification: I certify to the best of my this community strategic plan is correct. Council and/or Coalition was involved i strategic plan. I have been authorized by the development of this Strategic Plan.	I certify that the n the developmen	Comr nt of th	nunity Ad iis commu	lvisory nity
Signature of Primary Contact				Date
Signature of Fiscal Agent			 Date	

Form 2: Geographic Setting/Community Characteristics Limit 2 pages

Describe the geographic setting of the community.

- What are the geographic boundaries?
- What are the socio-economic issues relevant to the community?
- What are the characteristics of the community?
- Describe the target population you will be focusing on.

Geographical Boundaries:

Population, 2004 estimate	15,626
Population, net change, April 1, 2000 to July 1, 2004	1,053
Housing units, 2002	7,204
Homeownership rate, 2000	81.3%
Median household income, 1999	\$40,794
Land area, 2000 (square miles)	4,069
Persons per square mile, 2000	3.6

Socio-Economic Issues:

Personal income per capita, 2004, \$27,384 Finding good, high paying jobs is a struggle in the county. In recent years there has been improvement but we are still lagging behind other neighboring states.

Individuals who obtain a college education must rely on the educational system for work, other than that gainful employment is hard to find.

One's social position in this area is related to the family name. Lifestyle characteristics normally associated with income, education, or profession is secondary to the family history. This thinking is ignored by others who choose to locate in the area and establish their way of life.

Characteristics of the Community:

The way of life in this area is based on several traits. Individualism, with the ability to make ones own way is highly valued. Individuals want to be highly independent and enjoy their rights as landowners and residents. People are hard working and they enjoy the fruits of their labors by being active in avocational pursuits. Material comforts and "things" are important to community members. Having some of those "things" is a status symbol; it also creates a sense of belonging.

There is not a high level of cultural diversity in the community. There is little diversity in ethnic, cultural, religious, or thought. Appreciating and

understanding diversity, cultural sensitivity, makes culturally appropriate prevention programming an ongoing and ever-changing process.

Target Population:

We are focusing our program on two separate age groups. We have found a program that addresses the needs of both the 21 and under population as well as the 21 and over population.

21 and under youth need prevention services. Not only are they underage-they are the most inexperienced, and perhaps the least informed. Yet, surprisingly enough, they are the ones having most of the alcohol and drug problems.

Adults experience the majority of problems.

Prevention efforts capable of impacting adults as well as youth require more than simple "no use" messages – and more than the single goal of reducing use. Reduction of risk for problems is also necessary.

For these reasons we have chosen the Lifestyle Risk Reduction Model which focuses on the reduction of problems rather than the reduction of use, and how this distinction impacts prevention programming.

Form 3: Coalition Involvement

Limit 2 pages

Describe the coalition and its involvement in the implementation of the strategies.

• What are the coalition's vision and mission statements?

Our Mission is to help all children and families in Lincoln County become more resilient by providing community prevention activities. These activities are intended to support and strengthen families by using the unique resources of the community.

A greater vision of the coalition is to become a household name and to be associated with all the efforts that go into making our communities a better place to live. We want residents to instantly know, when they hear the name of the coalitioin, to have an understanding of what we do and how we are going about doing it. We envision a greater involvement from individuals, groups, families, and anyone else who is interested in change. We will continue to be mavens of information to our members and our communities.

• What is the history and makeup of the coalition?

Because of the large area that the county covers and the fact that the lead agency has offices in both the north and south end of the counties, two coalitions were formed to support efforts county wide.

For over 5 years both coalitions have retained leadership that has developed coalitions into working organizations. Great effort has been placed in partnering with the right individuals in the right organizations that have an interest in the well-being and quality of life in their communities.

We are diligently making efforts to improve our relationships with our partners in cause. We are currently working to enhance our relationship with business owners and law enforcement. We are finding business owners who are willing to attach the name of their business to some of our community causes. Some are willing to spend money to help with some of our planned social norming campaigns.

We want our law enforcement personnel to know what we are doing with prevention efforts and that we support them and are listening to the suggestions that they have. They are the ones whose eyes and ears are constantly being exposed to the issues around the communities. We are currently working with the Sheriffs Department on a social norming campaign.

Form 4: Consequence & Consumption Areas Limit 2 pages

Describe the alcohol-related consequence and consumption areas your community will be focusing on. Refer to Questions 5 and 9 from the Needs Assessment Workbook.

• Consequence areas could include alcohol-related crime, alcohol-related car crashes, and/or alcohol dependence and abuse.

Our efforts our concerned with reducing and delaying use. Another more critical factor is to reduce a certain kind of use, high risk use.

Delaying use of alcohol will allow an individual to grow and develop physically, emotionally and mentally. Delaying use will also reduce the risk for social and legal problems. If youth have time to develop life skills they can be better prepared to find alcohol-free ways to live.

Our efforts are totally focused on high risk behaviors and the social & legal consequences of those behaviors. It is high risk drinking, not drinking per se that causes alcohol problems.

Research indicates that 30% of drinkers drink 90% of the alcohol consumed. And that only 1/3 of that group is addicted. The other 2/3rd of that group can still benefit from prevention services. (Greenfield, Giebrech, and Kavanagh, 1996)

• Consumption areas could include underage drinking or adult binge drinking.

Percentage of Students Who Have Had a Drink in the past 30 Days (2001 – 2006 PNA)

Grade	2001 County Data	2004 County Data	2006 County Data	Trend
6 th	1.0	3.1	2.2	-
8 th	8.9	5.8	14.4	+
10 th	17.2	21.1	25.7	+
12 th	21.1	23.0	26.5	+

Although the rates from this data are less than the state averages, the rates are still trending up in our county. 8th & 10th graders are the biggest offenders which tell us that we should take our norming efforts into the elementary schools and get to the 4th and 5th graders. If we had a program over the next 2 years at this age range would our 6th grade data change when the 2009 YRBS is conducted? Social norming efforts in this age range will be a part of the strategy.

Limit 2 pages

Describe the intervening variables/causal areas of substance use in the community.

• How did you respond to Question 40 in the Needs Assessment Workbook?

Social Availability & Community Norms will be at the top of our list when considering the causal areas. There is consensus among CAC, law enforcement, and others that there is easy access to finding product and that it is even easier for underage drinkers to access product. There is a level of acceptance in the community and the attitude that if it does not effect me directly than it's not my issue. This area will also cross-over into the community norms area. There needs to be a greater awareness of the problems associated with high risk use. A norming campaign will address the issue.

We will consider these variables in the delivery of a norming campaign. (Not all inclusive)

- o Family, School, & Neighborhood attachment.
- o Adult Role Models.
- o Positive Peer Influence
- Youth Programs and activities
- o Time at Home communication, self development, safety.
- o A Sense of Higher Expectations in life.
- Problems associated with high-risk behaviors.
 - > Why are you focusing on these areas? Justify your reason.

It is the areas that data is supporting. Community Norms & Social Availability are the reoccurring themes during every CAC meeting and in conversations with other concerned individuals and community members.

I have had an educational administrator state to me that if we were to somehow curb the use of alcohol and drugs among the student population, a majority of the disciplinary issues in the schools would be eliminated.

Law enforcement personnel describe the many parties that are available to underage drinkers on the weekends. They have certain areas of the National Forrest where they could use additional personnel every weekend to deal with the issue. They describe how parents seem to be oblivious to what their kids are doing on the weekends and what plans they are making and who they are "hanging-out" with. Some parents just do not seem to care.

Form 6: Community Resources Limit 2 pages

Describe the current community resources available to address the targeted substance use issues in the community.

Schools, businesses, law enforcement, public health, media outlets, partner agencies, all of these areas have individual who are willing to commit time to our efforts. They are not strangers to the issues and speak intelligently on their stance. There is nothing stopping us if we need a time or place for educational seminar or a public forum.

• What were the results of the Community Resource Assessment (Table 51 from the Needs Assessment Workbook)?

Causal Area	Strategies	Resources
Retail Availability	Afton Town council was recently approached regarding the hours of sales. No changes were made to the city ordinance.	Current laws & statutes. Enforcement of current laws and statutes. Business compliance & training.
Criminal Justice	Initiating correspondence with circuit and municipal courts to ensure that the court ordered class work and programs are being conducted and which offenders are attending.	Community Intervention coursework offered by the counseling center. TEG/TAP classes and Prime for Life.
Social Availability	Advertising plan is in development.	Media outlets
Promotion	One local newspaper has agreed to publish all articles or press releases surrounding this issue.	Coalition member is employed by the newspaper and is highly community proactive.
Community Norms	Advertising Plan is in development	Businesses, Lincoln County Public Health, Lincoln County Sheriff's Department.
Individual Factors	Working with the youth services coordinator at one high school who helps with the students who are referred from Municipal Court	We address her needs in coalition meetings as they are brought to the agenda.

Form 7: Strategies No page limit

Describe the community-based strategies to be used to address the targeted substance use issues in the community.

PRIME FOR LIFE & Social Norming (It is a two-fold approach)

Prime for Life is a unique program and different from many prevention and intervention approaches, it is more than just an awareness program. It is designed to influence behaviors using a research-based persuasion protocol. It is based on the Lifestyle Risk Reduction Model which was articulated in 1983 by the Prevention Research Institute. The model focuses on the reduction of problems related to alcohol and drug use. The model specifies three important, measurable, & behavioral goals:

- 1. Increase abstinence for a lifetime
- 2. Delay the age of first use of alcohol
- 3. Reduce high-risk choices.

Our strategy is to reduce by 20% the percentage of youth (6-12 graders) who are consuming alcohol in a thirty day period.

As we are delivering the message of high-risk behavior we are going to use a norming campaign that will use association about the effects of alcohol. The attached photo will speak 1000 words about what the message is. We have approach both private and public owned operators of sanitation companies who are willing to allow the use of their vehicles to help spread the message.

The Lincoln County Sheriffs office has also approach us about using a similar idea that can be attached to their fleet of trucks. The Sheriff and his captains are working on the message. They understand that it must be about and connected to adult binge drinking and underage drinking. We have found a graphics artist who will help with the ultimate design and we have the company in place that will produce the final product.



How are the selected strategies appropriate? Justify your selection.

It is something that has not been done before. We are taking it to the community level. We are actually going to go beyond the minutia and rhetoric we have seen from other programs and attempts in prevention in our area. No more feel-good stuff. It's time to take an in-your-face approach to a rising problem. Our strategy has businesses, community, and the court systems saying, – Let's Go – give this a shot.

• How will the selected strategies address the consequences, consumption, and intervening variables identified?

The model is intended for adults in many settings, from court-ordered audiences to the workplace, or places of worship.

The model is often used for youth ages 13-20 who already engage in high-risk drinking or drug use or who are in a group likely to begin making choices that increase risk for problems.

The model addresses the problems of high-risk use – *consequences*.

It is targeted to the high-risk user - consumption.

It covers the risk associated with any type of alcohol-related problem over a lifetime, thus addressing the *variables*.

• How are the strategies evidence-based? Provide verification that they are indeed evidence-based.

Under the Prevention Frame work project we will rely on point 3 of the definitions:

Documentation of effectiveness based on the following 3 guidelines:

- 1. Solid Theory that has been validated by research.
- 2. Intervention that is supported by a documented body of knowledge.
- 3. Consensus among informed experts to be effective based on theory, research and practice experience.

"Evidence based practice" means different things to different people and agencies. This is sometimes used interchangeably with "best practices" and/or "research-based;" sometimes not. PRIME For Life is research-based in three ways. First, the content is based on current, sound research (about 1600 references). Second, the processes utilized in the program are based on "best practices" in the behavioral change field. Third, PRIME For Life and its earlier versions have program evaluation/outcomes research conducted over a 23-year period supporting its ability to increase low-risk attitudes, perceptions of risk, motivation to change, behavioral intentions to change alcohol and drug choices, and to change reported drinking choices. The third area is where most of the attention is now going nationally, sometimes without full consideration of the first two areas.

More recently, evidence based practice is used to describe programs and practices on SAMHSA National Registry of Evidence-based Programs and Practices (NREPP), which has become a leading national resource for information on the scientific basis and practicality of interventions to prevent and/or treat mental and addictive disorders. Prevention Research Institute is in the process of applying for inclusion on NREPP.

Prevention is a comprehensive and systematic effort. There are multiple projects scattered across the community from various agencies. It may mean that a lot of prevention programming is happening but it does not mean that a comprehensive effort exists. The Prime for Life program and its presenting model say that comprehensiveness involves reaching multiple audiences with multiple prevention strategies.

Form 8: Community Readiness & Experience

Limit 2 pages

Describe the community's readiness to address the identified issue(s) and strategies.

- How has the community's readiness been assessed?
 - Needs assessment with a population profile, resource assessment, and a measure of the readiness to address the need and problem area.
 - > Clearly defined issues backed by data.
 - Coalition Education and involvement. It is our belief that informed and educated stakeholders are essential to success.
 - > Careful selection of policies, programs, and practices to be implemented.
 - Plans to monitor, evaluate, sustain, or adjust the plan. Replace any effort that fails.

Describe examples of prior community experience, successes, and barriers with this issue.

What has been tried before?

Being new to this position I cannot speak to just what has been done in the past on the issue of underage drinking and adult binge drinking. The city council in one town was petitioned to have the retail purchase hours for alcohol reduced. That did not go anywhere. Would a reduction in hours reduce the issue? I don't know. I have not looked into the data. My first thought is that a shortened window of time would have no effect. Those who purchase would just alter their course. PNA data form 2006 for Lincoln County showed that only 3% of 6-12th graders purchased alcohol from a licensed retail establishment; that tells me that retail outlets are not a major cause to underage drinking.

I have found information regarding exploring an excise tax. From what I can see this did not get off the ground.

What has worked?

In the area of underage drinking the data is not encouraging. Since 2001 the PNA data of the % of students who have had a drink in the past 30 days has tended upward in our county for the 2001, 2004, 2006 measured periods.

Once again, not having been involved in this cause during that period it is hard to say what has worked. We like to believe that someone along the way was influenced for good because of the past efforts of the coalition and agency efforts.

• What have been the struggles?

Our situation is no worse and likely not that much different than any other fiscal agent. It is difficult to get members of the CAC to truly catch the vision. They come up with, and support, all the great ideas that can be conceived. They just want the employees of the agency to do the work. They understand that the fiscal agent is ultimately responsible for the grant and its expenditures and therefore has to make decisions on how grant monies are spread-out to cover a myriad of cost. Part of the reason they are great coalition members is because of involvement in many areas, when they start to balance their activities and work the extra activity of coalition work might be spreading them to thin.

• What is different now?

We are stepping-up our efforts to inform the greater communities of where our focus is and what we are doing. The week of August 23rd we finally had a letter to the editor printed from someone who was indifferent to our tobacco-free workplace effort. We are attempting to raise a greater awareness of our issues; don't drink and drive is a message that everyone, even those who do drive impaired, understands. We are attempting to go beyond that and help them to understand the problems that come as a result of high risk behaviors. Another example, smoking causes lung cancer; everyone knows that. Tobacco use is the leading cause of early periodontal disease in adults. Who knew? There are layers of thought beyond the basis messages and that is what we are trying to make a difference with.

<u>Products and services are not chosen by consumers for their similarities; they are chosen because there is a perceived difference by the consumer.</u>

We have to be bold and outspoken. We need to raise the ire of the opposition. Proponents and Opponents can help spread the message. Just like a contagious virus, a social epidemic does not differentiate between the two it only continues to spread among the entire population.

Form 9a: Activities & Outcomes

No page limit

Describe the coalition's planned activities for Year 1 implementation and Year 2 implementation to address the strategies.

Planned activities include two 6 month long social norming campaigns the first of which is sponsored by the coalitions and some interested business partners. The second is a campaign sponsored by the coalitions in partnership with the Lincoln County Sheriffs Department. Both activities are centered on social norms and will be highly visible throughout the county.

The coalitions will continue to meet on a monthly basis for feedback and to adjust programming if necessary.

Another effort with the campaign is to meet on a semester basis with the youth groups at the high schools and middle schools to work on pushing the campaign at the peer level. At this level most programs, especially in our communities, teach and preach the need for abstinence. Utilizing peer influence to address delaying use has never been an approach. Discussing the issues associated with high risk use has been discussed in former programs but the actual problems that result from high risk use are not sufficiently delved into.

In an effort to keep the norming campaign community based we have teamed up with our local media outlets who have agreed to help with PSA's and newspaper coverage. Over the holidays of Thanksgiving, New Years & Christmas, 4th of July and Labor Day in 2008, there will be 40 second spots on the radio stations regarding impaired driving. A coalition member will be asked to write the ads and possible do the voice over. The ads will have underage drinking as a theme. We can also utilize the County Sheriff who has a good radio voice.

Bi-monthly newspaper ads will appear for a 3 week period during the designated months. The ads will be associated with both underage drinking and adult binge drinking. Businesses that are concerned with these community challenges have committed to assisting with the ad campaigns.

• Include a timeline specific to the coalition's project (see Forms 9b and 9c). (See forms 9b and 9c for time line)

Describe the associated short-term and long-term outcomes expected.

• Short-term: 1-2 years

It would be a desirable goal to see underage use completely eliminated. Not possible. In the first two years of the program we want to send a new message. Delay use. We believe that everyone understands that it is the current law. An area we address in

high risk use as a likely problem or outcome. An outcome that we want to see is if the message of delay can become a norm as opposed to the exception.

We want the 12-18 year old students to understand that it is normal to delay use (high risk use). Not only because it is the law; but because of the health, emotional, legal, financial, and other issues attached to early use. Our hope is that an outcome will be the fact that delay has become the popular thing to do among students and their peers. Year two of the plan will be to work with WYSAC in an effort to gather information about 2 areas in our state that are due for some change. Sobriety check points and ignition interlock control devices.

Such changes need to start happening. It will need to be a grassroots effort not just by local coalitions but the division of substance abuse at the state level needs to get involved and be more vocal in relaying this type of need from the community level to the legislative level. The same evaluation and needs assessment process that has been done with SPF/SIG could be done with this issue and the results presented to lawmakers. Opposition groups will call it more government. It is not more government. It has to be an effort to hold individual citizens accountable for breaking laws and endangering the lives of others.

• Long-term: 3-5 years

We have no idea how long it will take to change the norms within our communities. Our YRBS data states that the 12-18 year old crowd is experiencing an increase in sensation seeking behaviors. Some experimentation is to be expected from adolescents. With a peer-based program we hope to see a decrease in this area. In a way it would be an unintended outcome of the strategy and might extend to areas other than alcohol.

Form 9b: Time Line (Year 1) Limit 2 pages

Applicant Agency: High Country Counseling Center

List the key activities, which will be conducted during the year. Be sure to include the anticipated start-up dates for each of the strategies to be funded under this grant. Activities listed are samples. Dates may be changed by the Division.

Activities	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
	07	07	07	08	08	08	08	08	08	08	08	08
Contractual report and												
expenditure report:												
January 2008, April				X			X			X		
2008, July 2008,												
October 2008												
Statewide Prevention	TBD											
Framework Meeting												
Community Advisory	X	X	X	X	X	X	X	X	X	X	X	X
Council Meetings												
Alcohol Community	Х	Х	Х	Х	Х	Х						
Campaign (Oct 07)												
Sheriff's Office Norming							Х	Х	Х	Х	Х	Х
Campaign												
Holiday Spa's		Х	Х	Х						Х		Х
RAD Student	Х			Х			Х					
Presentations												
Newspaper Ads	Х		Х		Х		Х		Х		Х	

Form 9c: Time Line (Year 2) Limit 2 pages

Applicant Agency: High Country Counseling Center

List the key activities, which will be conducted during the year. Be sure to include the anticipated start-up dates for each of the strategies to be funded under this grant. Activities listed are examples. Dates may be changed by the Division.

Activities	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
	08	08	08	09	09	09	09	09	09	09	09	09
Contractual report and												
expenditure report:												
January 2009, April	X			X			X			X		
2009, July 2009,												
October 2009												
Statewide Prevention	TBD											
Framework Meeting												
Community Advisory	X	X	X	X	X	X	X	X	X	X	X	X
Council Meetings												
Needs Assessment and	Х	Х	Х	Х								
Data gathering- Check												
points and ignition												
devices. Build Capacity	Х	X	X	X	X	X	X	X	X	X	X	X
Dulla Gapacity		_ ^	_ ^	^	_ ^	^	_ ^		^	^		
Strategic Plan						X	X	X				
Strategic Fiatr						^	_ ^	_ ^				

Policy & Program				Х	Х	Х			
Evaluation &						Χ	Χ	Χ	Χ
presentation									

Form 10: Budget Limit 2 pages

Page 24 contains a sample budget form that will be used for all communities. Also include a detailed budget narrative explaining your proposed expenditures. Please keep all categories the same. Any category not listed may be added.

Our norming campaign will be a partnership with the Lincoln County Sheriffs Office and area businesses who are interested in attaching their name to our community causes. Much of our effort will be a unique way of sending the message about underage drinking and adult binge drinking. It goes beyond the traditional ways of advertising and promotion and will be seen on every roadway in the county. We have budgeted money in the areas of promotion and advertising to cover the first year of the campaign.

Monies are also budgeted to train and develop staff members in delivering the message of the problems that are associated with high risk behaviors related to alcohol consumption.

Our evidence based strategy, Prime for Life, will be a new step for our prevention staff. By the end of October, 2007, the prevention staff and coordinator will be trained to facilitate and deliver the program. We are working with this program because of its efficacy and recommendation from one of our county circuit court judges. Travel, training and curriculum costs are budgeted to cover the out-of-state training.

Other major expenditures include the mandated costs of technical assistance and evaluation. A cost that consumes approximately 13% of the grant budget.

State Contract Quarterly Invoice for Wyoming SPF SIG

SUBMIT TO:		EXPENDITURES FOR QUARTER AND YEAR					
Substance Abuse Division							
Wyoming SPF SIG	222	(D) (15th C)	1 .1 C . 1:				
6101 Yellowstone Road - Suite Cheyenne WY 82002-0480	220	(Due On 15" of ti	he month for preceding	g quarter.)			
Cost Description	Rudgeted Amount	Current Month Exp	Year to Date Expenditures	Exp			
PERSONAL SERVICES							
Salaries & Wages	43000.00						
Employer Paid Benefits	4145.00						
SUPPORTING SERVICES							
Internet Service	In kind						
Telephone/Cell Phone	In Kınd						
Vehicle Expenses TRAVEL/TRAINING/MEETINGS	600.00						
	2000.00						
Travel In-State Travel Out-of-State	2000.00 1300.00						
Training Fees	1000.00						
Miscellaneous Meeting Expenses	1000.00			1			
SUPPLIES							
Office (CAC meetings)	750.00						
Postage							
Promotion/development	6465.00						
EQUIPMENT (computer)	1500.00						
Maintenance							
Rental							
GRANTS-IN-AID							
PONATIONS-CITY, COUNTY,							
OTHER INCOME							
CONTRACTUAL SERVICES: Attach	5702.00						
documentation to include: WypTAC, Contract	5792.00 3621.00						
services WYSAC							
W 1011C							
MISCELLANEOUS COSTS							
A. Training Workbooks	500.00						
B. Other: Office Supplies	285.00						
C. Advertising	3000.00						
TOTAL	73,958.00						
LOCAL AGENCY NAME and ADDRESS:	High Country C	ounseling & Resource C	enters				
NAME and TITLE OF REPORTING OFFI		-					
NAME and TITLE OF REPORTING OFFI	CIAL: Carry Har	ins - Grants Coordinate)1				
TELEPHONE NUMBER OF LOCAL AGE	NCV.						
	x: 307-885-5206	E-Mail: pre	evention@silverstar.co	m			
I certify that the expenditures reported ab Department of Health.	oove have been fo	unded totally with fund	ds awarded by the W	yoming			
SIGNATURE OF AUTHORIZED OFFICE	AL		DATE				

Form 11: Community Infrastructure Limit 2 pages

Describe how the project will enhance the community's prevention infrastructure. Describe how it creates or improves upon:

- Coordinated efforts: Members of the existing coalitions represent various agencies and organizations in our communities. This in and of itself is a coordinated effort. Members are beginning to see how we are focusing our strategies to partner with the agencies or businesses that are relative to our strategy and efforts. Keeping in mind that they have been active participants in assessing needs and determining the areas of focus.
- Organizational structures: If the norming campaign has an effect on the various subcultures that exist within businesses and other organizations so much the better. It would be considered an unintended outcome of our efforts.
- Planning: Success with the effort may lead to a greater level of involvement from community stakeholders. Success may prompt coalition members to embrace a more active role in the processes, plans, and execution of the grant process and the determined strategies.
- Data systems: Measuring the strategy outcomes will continue to be a challenge with a social norming campaign. Random phone dialing would be the best way to measure the penetration and exposure of the strategy. It is time consuming and expensive to conduct.
- Workforce development: We would have no way of knowing if a sober workforce has any effect on the community's prevention infrastructure. We would likely conclude that a sober workforce would be more attentive, more productive, less likely to be absent from work, and more efficient. This would only be assumptive on our part.
- Evidence-based practices: A work in progress. With the emphasis on the use of evidenced-based strategies time and measures will tell us of future successes.
- Cultural competence: With the Prime for life program being initiated and partnered with the court systems in two counties, it is our intention to become a greater resource in our communities. Our agency must become a bridge builder and foster a greater sense of community outreach. Our staff and facilitators can only offer training & educational programs; it is up to the individuals involved to determine their state of readiness to change. The individual must determine what they value. What they want in the future, their level of commitment and their plan for change.
- Evaluation and monitoring: We will need to evaluate and monitor. No one else will. The community is more interested in the final results not necessarily how we got there. They see that as our job.
- Sustainability: We cannot do it alone. That is why we are carefully evaluating the businesses and agencies with which we want to partner in our efforts. They bring other resources and funding that can help with the long-term efforts

involved in the complex world of substance abuse prevention strategies. Our plans and strategies must be a "good fit" to the issues and problems that our partners face in their day-to-day operations; otherwise, their interest and commitment will be short-lived.

Form 12: Cultural Competency Limit 2 pages

Describe how the project will ensure that planned activities and processes are culturally competent?

The term "cultural competency" refers to a long-term, developmental process that moves beyond "cultural awareness". Cultural competency is an engaging, life-long journey of expanding your horizons, thinking critically about power and oppression, and behaving appropriately. Culturally competent communities have a mixture of beliefs/attitudes, knowledge/experience, and skills that help them to establish trust/rapport and communicate effectively with others.

With regard to beliefs/attitudes, the culturally competent community is:

- aware of and sensitive to their cultural heritage and also respects and values different heritages;
- aware of it's values and biases and how they may affect the perception of other cultures;
- comfortable with differences that exist between it's culture and other cultures' values and beliefs; and
- Sensitive to circumstances (personal biases, ethnic identity, political influence, etc.) that may require seeking assistance from a member of a different culture when interacting with another member of that culture.

What steps and procedures will be implemented?

We will continue to have the best trained staff and coalition. They will be informed and updated constantly. We will invite them to think critically about the issue of alcohol and the problems that come with high risk behaviors.

Our small communities have developed attitudes and values that go back for generations. They do find it difficult to adjust to any thinking or progress that infringes or impends upon the "way it's always been done here" attitude that is prevalent. Our norming campaign will focus step-by-step on the problems associated with use and just not use in and of itself.

As we move through the norming campaign the next steps in year two (2) will be to start advertising new problems. By this I mean problems for the offender. The State of Wyoming needs to start investigating the issues of sobriety check point and ignition interlock control devices. Both of which have measured successes in other parts of the country.

How will cultural competency be assessed?

We will need to effectively communicate with our business partners and with other diverse groups from within our community. We will conduct informal assessments with members of our law enforcement agencies, educators, EMT's & First Responders, Homeland Security, Medical practitioners, Media resources and others. We will rely on their feedback regarding the norming campaign by utilizing interviews both in person and via phone or email. We will work with WYSAC to determine the best questions for feedback and measurement.

Form 13: Sustainability Limit 2 pages

Describe how the coalition will ensure that efforts are sustained after the project ends.

Strategies to sustain efforts include:

- Continually expanding coalition membership to include a cross section of the community with an effort to expand diversity.
- Proactive involvement with other partners with similar missions and objectives as they relate to areas of ATOD.
- Within the partnerships we are looking to increases donations, in-kind services, or fund raising. This will allow for the coalition to increase its capacity to reach more individuals and families regarding our particular community challenges.
- Constancy amid Change. As the communities continue to grow and change we
 will need to revisit the mission and vision to accurately represent our goals.
 We must ever be prepared to shift gears with the changing needs of our
 communities.
- Business Buy-in. We will continue to use the media with business cosponsorships as a way to inform the community of the issues and challenges relating to ATOD. Increased awareness of the social & community developmental needs of our youth, young adults, parents, and families is paramount in raising the quality of life in our communities and increasing citizen involvement.
- Coalition members want to see action. They want to see visual confirmation of the efforts from the fiscal agent. They want to see plans carried-out. They want to see their ideas and input placed into motion. As the fiscal agent with overall responsibility for the expenditures of the grants we will continue to inform and supply the coalition members with evidence of progress.
- There will be a new emphasis placed on evaluation of projects to determine success and measure outcomes. WYSAC will continue to be our evaluator of choice.
- Strong leadership is essential to the coalition and its efforts. Program mangers
 will insist that there is continued stress on effecting change, leveraging
 connections among people and utilizing resources to support coalition
 longevity.

Form 14: Evaluation Limit 1 page

Describe how the coalition will evaluate the activities and outcomes of the project. Evaluations will be conducted in collaboration with Prevention Framework evaluators at the Wyoming Survey & Analysis Center (WYSAC). All you need to include is the fact that you agree to work with WYSAC on the evaluation of all strategies.

The coalitions and the lead fiscal agent understand that we are not in this alone. We will utilize the expertise of the Wyoming Survey & Analysis Center to help us develop better ways to evaluate strategies and measure outcomes.